

WAKU WAKU Hoikuen
Regular and Part-time Childcare Registration Application Form

Tokyo Medical and Dental University - Vice-president

I agree to the rules stipulated in Article 6 and 8 regarding the usage of the childcare facility at the Tokyo Medical and Dental University and will register as follows. After registration, I pledge to follow the rules agreed upon.

Name: _____

Date ____/____/____

Childcare division	<input type="checkbox"/> Regular childcare <div style="display: inline-block; border-left: 1px solid black; border-right: 1px solid black; border-bottom: 1px solid black; padding: 2px; margin: 0 10px;"> <input type="checkbox"/> Basic <input type="checkbox"/> Extended </div> <input type="checkbox"/> Part-time childcare			
Period of use	Y ____ M ____ D ____ to Y ____ M ____ D ____			
Infant/Child's Name		<input type="checkbox"/> M <input type="checkbox"/> F	Year M/D	Date of Birth
Staff/ Student Name				
Staff position	Ext.			
Job title	<input type="checkbox"/> Full-time employment <input type="checkbox"/> Part-time (days a week)			
Student position	<input type="checkbox"/> Postgraduate <input type="checkbox"/> Undergraduate			
Home Address	Zip code:			
	Phone No.		Mobile	
	E-mail		FAX	
Emergency Contact	Phone No.			
Spouse/Partner Name				
Staff position	Ext.			
Job title	<input type="checkbox"/> Full-time employment <input type="checkbox"/> Part-time (days a week)			
Student position	<input type="checkbox"/> Postgraduate <input type="checkbox"/> Undergraduate			
Work / School name				
Work / School name Address	〒			
	Phone			

(Continued on reverse side)

Note 1: Place a check mark in the appropriate check box.

2. Please indicate the usage period until the last day of the year.

3. With regards the spouse or partner names, please fill in if:

- ① the spouse or partner is not a member of the faculty or a student,
- ② although a faculty staff member, working hours are under 5 days per week and have other work.

In this case, a position or student registration certificate is necessary.

4. When it is an adoption schedule at the time of an application, please submit a Certificate of Adoption Schedule (Attached). (Those who are adoption schedules in TMDU, please apply through the Personnel Division.)

If planning to enter the school, please submit a Pass Notification Certificate.

5. This personal information is used for the purpose of nursery entrance procedure, and use for the purpose other than this purpose or third parties other than a childcare management commission contractor are not provided with it.

Reason for applying to the nursery (why childcare is necessary)

Current childcare situation of the child hoping to enter the nursery.

If there is other information that should be conveyed. (for example: whether single parent or not)